## 621000268774

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R. HUNT Oclas/23

## **COVER LETTER**

TO: Registration Se Division of Cor				
	ES AND REALTY PLLC			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspon	ondence concerning this matter	to the following:		
	TASHA SHARP			
	<del></del>	Name of Person	<del></del>	
		Firm/Company		7(1)2
	13368 N C.R. 2299			513 5207
	-	Address	388	£3 ;
	RAIFORD, FL 32083		SS	PH F
	YOURFAVORITEREALT	City/State and Zip Code OR@TASHASHARP.COM	STATE	PH 4: II
For further information c	E-mail address: (concerning this matter, please c	to be used for future annual report not call:	ification)	
TASHA SHARP	,	904 796-0621 at ()		
Name o	f Person		ne Telephone Number	-
Enclosed is a check for the	he following amount:			
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fe Certificate of S Certified Copy (additional copy is	tatus &
Mailing Addres		<u>Street Address:</u> Registration Se	ection	
Registration Section Division of Corporations		Division of Co		
P.O. Box 632		The Centre of		
Tallahassee, I	FL 32314	2415 N. Monro	e Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

TNT HOMES AND REALTY PLLC	'omnery as it now appears on o	nr records )	
( <u>Name of the Limited Liability (</u> (A Florida Lir	mited Liability Company)	or records.)	
The Articles of Organization for this Limited Liability Com Florida document number L21000268774	npany were filed on 06/09/20	21	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company here:		
OVELY HOMES REALTY CO PLLC			
he new name must be distinguishable and contain the words "Limited	Liability Company," the designat	tion "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRES	55)		
			(2) (2)
		: "	
Inter new mailing address, if applicable:			S
• • • • • • • • • • • • • • • • • • • •	-	<u> </u>	
Mailing address MAY BE A POST OFFICE BOX)		<u>π</u> ω	- Aurani
			<u> </u>
B. If amending the registered agent and/or registered of gent and/or the new registered office address here:	ffice address on our record	s, enter the name	— of the new regi
Name of New Registered Agent:			
New Registered Office Address:			
<del></del>	Enter Florida stre	eet address	
<u></u>	, 111 <u>  12   1   1   11   11   11   11  </u>	, Florida	
	Citv		Zip Code

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

or remov	eu trom our records:		
MGR =	Manager		
AMBR =	Authorized Member		

<u>Title</u>	<u>Name</u>	Address	Type of Action
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te: If the date inserted in this bloc current's effective date on the Dep			filing requirements.	, this date wi	ill not be lis	ted
ecord specifies a delayed effective is filed.	date, but not an effective	ve time, at 12:01 a	i.m. on the earlier o	f: (b) The S	Oth day afte	er th
22 FEBRUARY	2023					
<u> </u>		Digitally signed by DN: cnaCALEB PER	CALEB PERLA .A, 0=HARVEST CPA PLLC, OU, es	mail=caleb@harvest	cpa net, c=US	
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Filing Fee: \$25.00